

## SPEAKER REQUEST FORM

Please make your request at least <u>30 days prior</u> to your event to ensure confirmation for your organization.

Organizat	tion Information			
Name:				_
Contact Person/Title:				_
				<u> </u>
	City	State	Zip	
Phone: (	)	Fax: ( )		
E-mail:				
Event Info	ormation			
Event Typ	pe:			
	vent Date: Event Time:			
	City	State	Zip	
Event Loc	cation Phone: ( )			
	<u>nformation</u>			
Topic (sel	lect one):  Truancy	Legislative Update	JCM Training	Other
A -1'	Lafaalla a /aalaat all	11-11-1-11 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		7 v - 15 (44 40 )
		that apply): Youth (9-11)		
Paren	ts Teachers/Fac	culty Judicial Staff	Juvenile Case I	vianager Program
Length of	time reserved for nrese	enters:		
	e:			
		ion:		
-p-co.a. <b>c</b> (	5.13.3.3.4.10110 <sub>/</sub> 111101111011			

Please e-mail or fax this form to: Attn: Catherine Klier Email: <a href="mailto:catherine.klier@houstontx.gov">catherine.klier@houstontx.gov</a> / Fax: (713) 247-8747